

**DECLARATION (37 CFR §1.63) FOR UTILITY OR
DESIGN PATENT APPLICATION
USING AN
APPLICATION DATA SHEET (37 C.F.R. § 1.76)**

Attorney Docket Number UTR-106XC1

First Named Inventor Kimberly D. Gwinn

COMPLETE IF KNOWN

Application Number 10/541,048

Filing Date June 29, 2005

Group Art Unit

Examiner Name

This declaration is directed to an application entitled: **Use of Herbs as a Delivery System for Bioactive Phytochemicals.**

As the below named inventor(s), I/we declare that:

This declaration is directed to:

The attached application, or

Application No. PCT/US03/22272, filed on July 15, 2003
as amended on _____ (if applicable);

I/we believe that I/we am/are the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought;

I/ we have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above;

I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT International filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under Title 35, United States Code §119 and/or §365 of any foreign application(s) for patent or inventor's certificate listed below and have also identified any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Application Serial No.	Country	Filing Date	Priority Claimed	
			Yes <input type="checkbox"/>	No <input type="checkbox"/>
			Yes <input type="checkbox"/>	No <input type="checkbox"/>

All statements made herein of my/own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. § 1001, and may jeopardize the validity of the application or any patent issuing thereon.

Full Name(s) of Inventors

Inventor One: Kimberly D. Gwinn	Citizen of: US
Signature: <i>Kimberly D. Gwinn</i>	8-20-05
Inventor Two: James F. Green	Citizen of: US
Signature: <i>James F. Green</i>	3/13/06
Inventor Three: Susan Hamilton	Citizen of: US
Signature: _____	

☐ Additional inventors are being named on the ___ additional forms attached hereto.

**DECLARATION (37 CFR §1.63) FOR UTILITY OR
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Attorney Docket Number	UTR-106XC1
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Application Number	10/541,048
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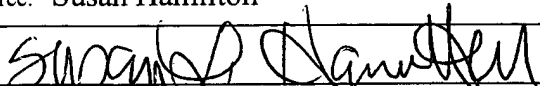
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Inventor One: Kimberly D. Gwinn	Citizen of: US
Signature: _____	
Inventor Two: James F. Green	Citizen of: US
Signature: _____	
Inventor Three: Susan Hamilton	Citizen of: US
Signature: 	

☐ Additional inventors are being named on the ___ additional forms attached hereto.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM

Application Number	10/541,048
Filing Date	June 29, 2005
First Named Inventor	Kimberly D. Gwinn
Title	Use of Herbs as a Deliver...
Art Unit	
Examiner Name	
Attorney Docket Number	UTR-106XC1

I hereby appoint:



Practitioners associated with the Customer Number:

23557

OR



Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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State

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Country

Telephone

Fax

I am the:



Applicant/Inventor.



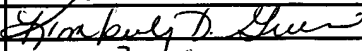
Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name Kimberly D. Gwinn

Signature



Date

3-12-06

Telephone

865-974-7135

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.



*Total of 3 forms are submitted.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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☐ The address associated with Customer Number:

OR

☐ Firm or Individual Name

Address

Address

City

State

Zip

Country

Telephone

Fax

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name James E. Green

Signature

Date

Telephone

865-588-5048

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

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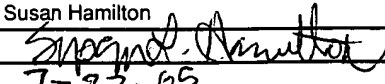
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OR

<input type="checkbox"/> Firm or Individual Name					
Address					
Address					
City		State		Zip	
Country					
Telephone		Fax			

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Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Name	Susan Hamilton		
Signature			
Date	7-27-05	Telephone	865-974-7324

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